

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/824,305
Filing Date	04/02/2001
First Named Inventor	MAHAJAN
Group Art Unit	2163
Examiner Name	n/a
Attorney Docket Number	21710-68378

I hereby appoint:

☒ Practitioners at Customer Number
OR

27730

☐ Practitioner(s) named below:

Place Customer Number
Bar Code Label here

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, entitled APPARATUS, METHODS AND ARTICLES OF MANUFACTURE FOR COMPUTERIZED TRANSACTION EXECUTION AND PROCESSING, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number **OR**

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71(Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)).

SIGNATURE of Applicant or Assignee of Record


Name **Umesh Mahajan**

Signature *Umahajan*

Date **06/14/01**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of TWO (2) forms are submitted.

Please type a plus sign (+) inside this box → 

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/824,305
Filing Date	04/02/2001
First Named Inventor	MAHAJAN
Group Art Unit	2169
Examiner Name	n/a
Attorney Docket Number	21710-68378

I hereby appoint:

☒ Practitioners at Customer Number
OR

27730

Place Customer Number
Bar Code Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, entitled APPARATUS, METHODS AND ARTICLES OF MANUFACTURE FOR COMPUTERIZED TRANSACTION EXECUTION AND PROCESSING, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number **OR**

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.7.1(Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)).

SIGNATURE of Applicant or Assignee of Record

Name Engin Tekkoc

Signature

Date

6/5/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of TWO (2) forms are submitted.